## PCoARlogo

**PERRY COUNTY ANIMAL RESCUE, Inc.**

379 Sugar Run Road, Millerstown, PA 17062

(717) 589-3005

perrycountyanimalrescue@yahoo.com

# **Cat Adoption Application**

The goal of Perry County Animal Rescue is to find accepting, permanent homes for the animals we rescue. The information on this form will help us to be certain that we are placing the right animal with right family.

**The Perry County Animal Rescue reserves the right to refuse adoption to anyone at any time.** Please complete this application in full. Incomplete applications will be returned to the applicant.

Adoption fees are: $ \_\_\_\_\_for cats, $\_\_\_\_\_\_for kittens (with spay/neuter refund). **Unless otherwise stated.**

Today’s Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of animal you want to adopt:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Co-Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State:\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you rent or own your home? Rent\_\_\_\_\_\_ Own\_\_\_\_\_\_ If you rent, can you provide proof that your lease agreement allows pets of the type and size for which you are applying? Yes\_\_\_\_\_\_ No\_\_\_\_\_\_

Please list all of the members of your household date of born, including yourself: Given names including middle initials.

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | DOB | 2. | DOB |
| 3. | DOB | 4. | DOB |
| 5. | DOB | 6. | DOB |

Please list your current pets and their health status:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NAME OF PET | SPECIES OF PET | AGE OF PET | **SPAYED or NEUTERED?** | **VACCINATIONS UP TO DATE?** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Does everyone in your household agree that you should adopt this animal at this time?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, why not?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does any one in your household have allergies to cats?\_\_\_\_\_\_\_\_\_\_\_If so whom?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the following information about all the pets you have owned in the past 5 years of your adult life, who are no longer with you:

|  |  |
| --- | --- |
| PET’S NAME | **WHY IS PET NO LONGER WITH YOU?****IF DECEASED, PLEASE BRIEFLY EXPLAIN CAUSE** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

Is this pet a gift for a family member or friend?\_\_\_\_\_\_\_\_\_\_\_\_ If so, who?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you prepared to give this pet as much time as needed to settle in and become a part of your family?\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who is your current or veterinarian in which will have you record for previous/present pets?  **PLEASE inform them we will be calling to eliminate delay in processing your application.** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Veterinarian’s phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we contact your veterinarian as a reference, and in the future, to assure this animal’s health?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you be having this cat/kitten declawed?\_\_\_\_\_\_\_\_\_\_

Will the cat be housed indoors and/or outdoors? \_\_\_\_\_\_\_\_\_\_

Will it be allowed on your furniture, or in your bed? \_\_\_\_\_\_\_\_

Who will care for the cat when you are away for long periods (vacations, etc.)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you aware that there is treatment for fleas and ticks?\_\_\_\_\_\_

If yes, what products will you use to keep your cat healthy and free of parasites?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you prepared for the average monthly cost of owning a cat?\_\_\_\_\_\_

Please list three references(one family member only) that we may contact to discuss your animal care experience and dedication with:

|  |  |
| --- | --- |
| NAME: | PHONE: |
|  |  |
|  |  |

Finally, are you prepared to love and care for this animal for its full life expectancy?\_\_\_\_\_\_

**By signing this application, if the unfortunate circumstance would arise that you can no longer care for the animal you have agreed to adopt, said animal must be returned to Perry County Animal Rescue. No surrender fee will be charged nor will a refund of any kind be given.  This animal may under no circumstances be given or sold to another party. Further, your signature allows Perry County Animal Rescue to visit your home semi-annually for at least the first two years after adopting the animal to ensure said animal is receiving proper care. PLEASE NOTE: Age, breed, training, temperament, health etc. are documented to the best of the Rescue’s knowledge and there are no guarantees. Be aware that you and all adults in the household may be subject to a background check.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of authorized PCoAR Representative:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THANK YOU FOR YOUR APPLICATION. WE WILL REVIEW IT AND RESPOND TO YOU AS QUICKLY AS POSSIBLE. PLEASE NOTE, THIS IS AN *APPLICATION ONLY*. IT DOES NOT GUARANTEE THAT YOU WILL GET THE ANIMAL YOU APPLIED FOR.